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		Application Number	09/760,981
		Filing Date	1/16/01
		First Named Inventor	LoGalbo, et al.
		Group Art Unit	2666
		Examiner Name	Duong, Frank
Total Number of Pages in this Submission	6	Attorney Docket Number	CM04762H

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ENCLOSURES

(check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Licensing-Related papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input checked="" type="checkbox"/> Petition for Revival of an Application for Patent Abandoned Unintentionally	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/Declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter with appropriate copies
<input type="checkbox"/> Extension of time Request	<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Response to Restriction Requirement
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Associate Power of Attorney
<input type="checkbox"/> Certified Copy of Priority Documents	<input type="checkbox"/> CD, Number of CDs	<input type="checkbox"/> RCE
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53		

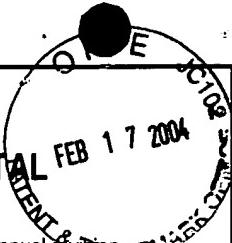
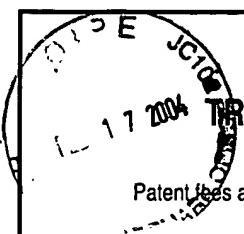
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Indira Saladi	Registration No.	45,759
Signature			
Date	February 12, 2004		

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Signature		Date	February 12, 2004



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Complete if Known

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		First Named Inventor	LoGalbo, et al.
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TOTAL AMOUNT OF PAYMENT		\$1,330.00	Attorney Docket No. CM04762H

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METHOD OF PAYMENT				FEE CALCULATION (continued)																																																																																																																																																																																																																																
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:</p> <p>Deposit Account Number 502117</p> <p>Deposit Account Name Motorola, Inc.</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee required under 37 CFR 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>				<p>3. 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